

**UNITEL STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: 5-19-95

2 Serial/Patent # 08/426920

3 Please refund the following fee(s):

4 PAPER  
NUMBER

5 DATE  
FILED

6 AMOUNT



Filing

4-21-92

\$ 31.00

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT  
OF REFUND

\$ 31.00

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9

1 9 -- 2 5 5 5

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: [Signature]

TITLE:

SIGNATURE: [Signature]

PHONE: X8-1901

OFFICE: ONPA

\*\*\*\*\*  
THIS SPACE RESERVED FOR FINANCE USE ONLY:

APPROVED: [Signature]

DATE: 6/10/95

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B